

General

Title

Preoperative evaluation: percentage of patients age two years and older undergoing elective non-high-risk surgery who have preoperative recommendations documented/communicated to the patient and/or surgical facility for all applicable comorbidities.

Source(s)

Institute for Clinical Systems Improvement (ICSI). Preoperative evaluation. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2010 Jun. 40 p. [26 references]

Measure Domain

Primary Measure Domain

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of patients age two years and older undergoing elective non-high-risk surgery who have preoperative recommendations document/communicated to the patient and/or surgical facility for all applicable comorbidities.

Rationale

The priority aim of this measure is to increase the percentage of patients two years of age and older undergoing elective, non-high-risk surgery who receive appropriate management of stable comorbidities prior to procedure.

Primary Clinical Component

Elective, non-high-risk surgery; preoperative recommendations for comorbidities (antithrombotic therapy, coronary stent/antiplatelet therapy, beta-blocker therapy, diabetic management, sleep apnea, smoking cessation)

Denominator Description

Number of patients (age two and older) undergoing elective non-high-risk surgery (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Number of patients having preoperative recommendations documented/communicated to the patient and/or surgical facility for all applicable comorbidities (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Evidence Supporting the Criterion of Quality

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

Evidence Supporting Need for the Measure

Need for the Measure

Unspecified

State of Use of the Measure

State of Use

Current routine use

Current Use

Internal quality improvement

Application of Measure in its Current Use

Care Setting

Physician Group Practices/Clinics

Professionals Responsible for Health Care

Physicians

Lowest Level of Health Care Delivery Addressed

Group Clinical Practices

Target Population Age

Age greater than or equal to 2 years

Target Population Gender

Either male or female

Stratification by Vulnerable Populations

Unspecified

Characteristics of the Primary Clinical Component

Incidence/Prevalence

Unspecified

Association with Vulnerable Populations

Unspecified

Burden of Illness

Unspecified

Utilization

Unspecified

Costs

Unspecified

Institute of Medicine (IOM) Healthcare Quality Report Categories

IOM Care Need

IOM Care Area

Getting Better

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding

Users of care only

Description of Case Finding

All patients (age two and older) undergoing elective non-high-risk surgical procedures

Patients who have had a cataract surgery within the preceding month can be randomly sampled to produce a list of at least 30 records for review. Selected records are audited using a check-list tool to determine whether all components of the assessment detailed in the guideline (refer to the National Guideline Clearinghouse [NGC] summary of the Institute for Clinical Systems Improvement [ICSI] guideline [Preoperative Evaluation](#)) were documented in the chart prior to the scheduled surgical date.

For more effective tracking of process improvement, data should be collected monthly.

Denominator Sampling Frame

Patients associated with provider

Denominator Inclusions/Exclusions

Inclusions

Number of patients (age two and older) undergoing elective non-high-risk surgery*

*Elective non-high-risk surgery includes planned, scheduled, non-emergent surgical procedures that allow time for a scheduled preoperative health assessment.

Exclusions

Patients younger than two years of age

High-risk procedures, such as cardiac or procedures anticipated to be prolonged (usually greater than two hours), are not included.

Relationship of Denominator to Numerator

All cases in the denominator are equally eligible to appear in the numerator

Denominator (Index) Event

Institutionalization

Therapeutic Intervention

Denominator Time Window

Time window brackets index event

Numerator Inclusions/Exclusions

Inclusions

Number of patients having preoperative recommendations documented/communicated to the patient and/or surgical facility for all of the following applicable comorbidities:

- Antithrombotic therapy
- Coronary stent/antiplatelet therapy
- Beta-blocker therapy
- Diabetic management
- Sleep apnea
- Smoking cessation

Exclusions

Unspecified

Measure Results Under Control of Health Care Professionals, Organizations and/or Policymakers

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

Numerator Time Window

Episode of care

Data Source

Administrative data

Medical record

Level of Determination of Quality

Individual Case

Pre-existing Instrument Used

Unspecified

Computation of the Measure

Scoring

Rate

Interpretation of Score

Better quality is associated with a higher score

Allowance for Patient Factors

Unspecified

Standard of Comparison

Internal time comparison

Evaluation of Measure Properties

Extent of Measure Testing

Unspecified

Identifying Information

Original Title

Percentage of patients age two years and older undergoing elective non-high-risk surgery who have preoperative recommendations documented/communicated to the patient and/or surgical facility for all of the following applicable comorbidities:

- Antithrombotic therapy
- Coronary stent/antiplatelet therapy
- Beta-blocker therapy
- Diabetic management
- Sleep apnea
- Smoking cessation

Measure Collection Name

Preoperative Evaluation Measures

Submitter

Institute for Clinical Systems Improvement - Nonprofit Organization

Developer

Institute for Clinical Systems Improvement - Nonprofit Organization

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Composition of the Group that Developed the Measure

Work Group Members: David Danielson, MD (Work Group Leader) (Mayo Clinic) (Anesthesiology); Steven Thompson, PA-C (Mayo Clinic) (Anesthesiology); Charles Boback, MD (Stillwater Medical Group and Lakeview Hospital) (Family Medicine); William Sypura, MD (Fairview Health Services) (Family Medicine); Peter Rothe, MD (HealthPartners Medical Group) (Internal Medicine); Jerry Stultz, MD (HealthPartners Medical Group) (Pediatrics); Kevin Bjork, MD (Stillwater Medical Group and Lakeview Hospital) (Surgery); Joann Foreman, RN (Institute for Clinical Systems Improvement) (Facilitator); Janet Jorgenson-Rathke, PT, MA (Institute for Clinical Systems Improvement) (Facilitator)

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Adaptation

Measure was not adapted from another source.

Release Date

2010 Jun

Measure Status

This is the current release of the measure.

Source(s)

Institute for Clinical Systems Improvement (ICSI). Preoperative evaluation. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2010 Jun. 40 p. [26 references]

Measure Availability

The individual measure, "Percentage of Patients Age Two Years and Older Undergoing Elective Non-high-risk Surgery Who Have Preoperative Recommendations Documented/Communicated to the Patient and/or Surgical Facility for All Applicable Comorbidities," is published in "Health Care Guideline: Preoperative Evaluation." This document is available from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#) .

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org ; e-mail: icsi.info@icsi.org.

NQMC Status

This NQMC summary was completed by ECRI Institute on January 10, 2011.

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